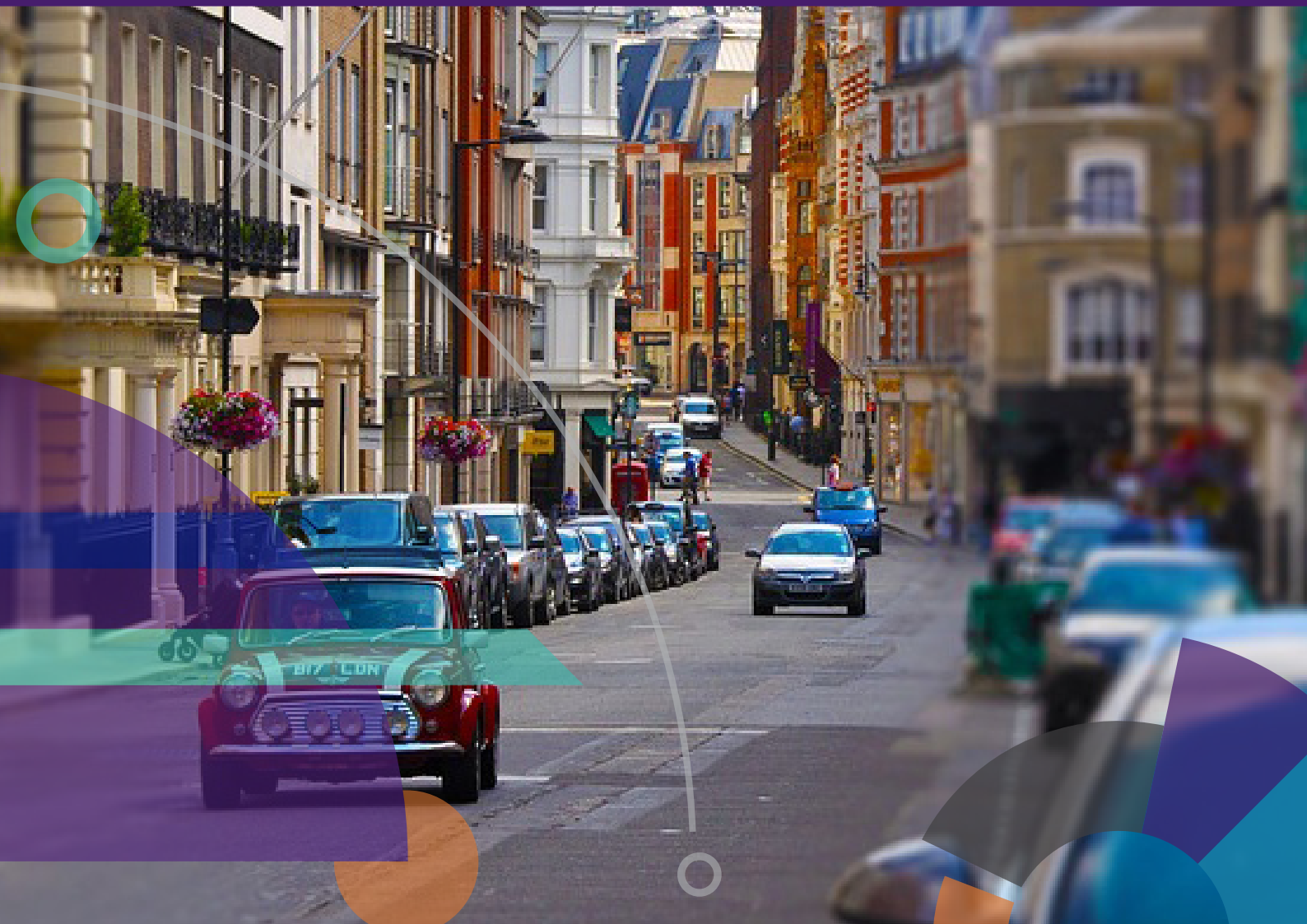


Housing First in the UK and Ireland

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Housing First in the UK and Ireland

About this publication

This publication has been produced by the CIH Policy and Practice teams across the UK. It is intended to provide information about how Housing First is working across the UK and Ireland, to highlight some of the challenges involved in developing Housing First and encourage discussion among housing practitioners.

We would like to thank all of the organisations who contributed their time and experience in helping to develop this document.

About CIH

The Chartered Institute of Housing (CIH) is the independent voice for housing and the home of professional standards. Our goal is simple - to provide housing professionals with the advice, support and knowledge they need to be brilliant. CIH is a registered charity and not-for-profit organisation. This means that the money we make is put back into the organisation and funds the activities we carry out to support the housing sector. We have a diverse membership of people who work in both the public and private sectors, in 20 countries on five continents across the world.

For more information, please visit www.cih.org

Contents

1.	Introduction	Page 3
2.	What is Housing First	Page 4
3.	Frequently Asked Questions	Page 6
4.	Housing First in Scotland	Page 7
5.	Housing First in Northern Ireland	Page 9
6.	Housing First in the Republic of Ireland	Page 11
7.	Housing First in Wales	Page 13
8.	Housing First in England	Page 16
9.	Further Information	Page 20

1. Introduction

While housing systems and homeless legislation vary widely across the UK, recent years have seen positive commitments from all Government administrations to tackle the issue of homelessness and, in particular, to address growing concerns about the number of people sleeping rough.

Because homelessness is recorded differently in each nation, there is no national figure that outlines the full scale of homelessness across the UK and many homeless people, particularly those sleeping rough, may not show up in official statistics at all.

What we do know is that rough sleeping is one of the most dangerous and traumatic experiences that a person can go through and it can have a devastating affect on a person's physical and mental health. [Research](#) published by Crisis shows that homeless people are much more likely to die young with the average age of death for a homeless person on the streets or while

resident in homeless accommodation just 47 years old.

There are a number of common drivers behind homelessness including poverty and inequality, poor mental health, substance misuse and lack of support networks. While homeless people's individual circumstances can be complex, there is a growing body of [international evidence](#) to suggest that the solution to street homelessness can be as simple as giving someone a home and the support they need to live there. The Housing First model advocates that support with mental and physical health and addictions can be far more effective after the safety and security of permanent housing has been put in place.

This publication explores the concept of Housing First, outlining the principles and setting out examples of how it is being put into practice across the UK and Ireland.



2. What is Housing First?

Housing First offers permanent accommodation to people in chronic need without requiring them to go through the formal homelessness system of waiting lists, hostels and temporary accommodation.

While models in different places may differ slightly, Housing First tends to be directed at people who are sleeping rough or have experienced repeat homelessness and have mental health and addiction problems.

Under Housing First there is no requirement for the homeless person to be “housing ready” or to have addressed their addiction problems before moving into a permanent home. Health and addiction issues are addressed after housing has been secured, and intensive, open ended support is provided to help the person to maintain their tenancy.

The origins

Most models of Housing First in operation today have been adapted from [Pathways to Housing](#), a programme established in New York City in 1992 by Dr Sam Tsemberis. Variations of this model have now been widely adopted across America and parts of Europe, most notably perhaps in [Finland](#) where evidence suggests that Housing First has contributed to a significant decline in the number of homeless people since being introduced in 2008.

Housing First has also been put into practice across the UK and Ireland. Sections 4-8 include information and case studies outlining how it is working in Scotland, England, Wales, Northern Ireland and the Republic of Ireland.

The principles

The most basic guiding principle of Housing First is that housing is a human right and that it should be the starting point of supporting a person to recover from other issues such as addiction and poor mental or physical health. The Pathways model sets out five clear principles which should underpin every Housing First project:

Housing - Immediate access to housing with no readiness conditions.

Choice - Consumer choice and self determination.

Recovery - Recovery orientation.

Support - Individualised and person-driven support is provided.

Community - Social and community integration.

While the principles have been adapted or built upon for different projects, the common foundations of Housing First are that people have a right to a home, that this right is not subject to conditionality and that people have access to intensive, open-ended, unconditionally-provided support. In this way, Housing First sets itself apart from traditional, “treatment-first” approaches, which require homeless people to address multiple, complex needs before they can gain access to housing.

Housing First can play a central role in a more general “housing-led” approach, where timely access to housing is prioritised. Increasingly, evidence suggests that this approach could have significant and positive effects in our efforts to tackle homelessness in the long term. Crisis, in their 2017 [Housing First Feasibility Study for the Liverpool City Region](#), argue that housing-led approaches

should be widely applied, and integrated into the mainstream system for preventing and tackling homelessness.

However, Housing First remains distinct from general “housing-led” approaches and the success of a true Housing First approach is measured by its fidelity to the core principles, including the provision of intensive, holistic support delivered through small caseloads.

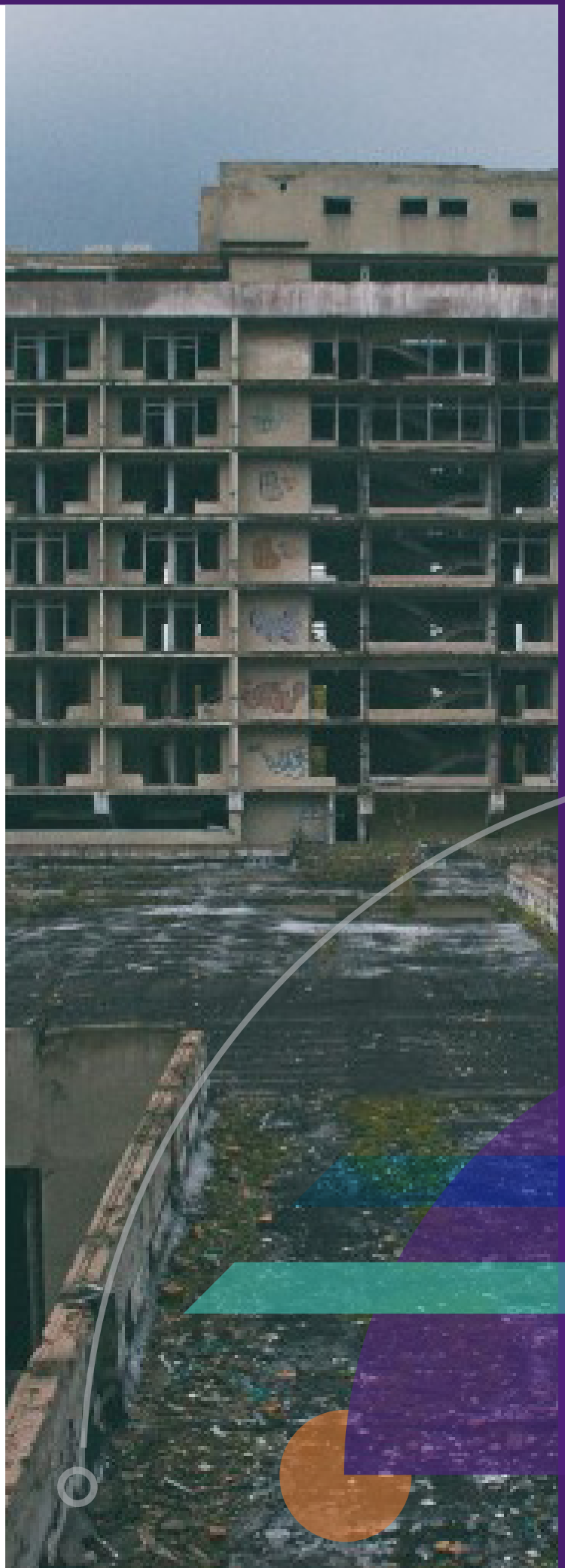
The evidence

In recent years there has been a mounting body of evidence of the benefits of Housing First. These benefits include:

- improved physical and mental health for service users;
- fewer interactions with the criminal justice system; and
- less need for emergency medical intervention.

Providing a permanent home means less disruption for the service user and also for the providers of statutory homelessness services. [Research](#) published by Crisis estimates the cost of a single person sleeping rough for 12 months is £20,128 compared to £1,426 where successful intervention has been carried out. This suggests that the cost of providing a home and support for a homeless person with complex needs through initiatives such as Housing First can be offset with savings elsewhere.

[Housing First Europe](#) provides a good source of examples, guides and research from across Europe.



3. Frequently Asked Questions

While the bulk of evidence suggests that Housing First can successfully reduce repeat homelessness and has positive outcomes for the individuals supported by it, there are a number of challenges that need to be overcome if Housing First is to be rolled out more widely. Some of the most frequently asked questions are addressed here. The following sections which outline how Housing First is being implemented across the UK also include some important pointers and case studies showing how Housing First is working in practice.

- **Where do the homes come from?**
 - o Different Housing First projects work in different ways. Homes can be sourced in the social rented sector and the private rented sector (PRS). While the PRS can be a useful source of stock, homes need to be within the Local Housing Allowance (LHA) rate to make them affordable. Social housing stock is often cheaper and offers more security of tenure but both can be used successfully.
- **Who pays for the support?**
 - o Housing First projects are funded in different ways and arrangements differ across the UK. Support can be funded by local authorities, charitable organisations or trusts, health or criminal justice departments.
 - o The additional costs associated with the provision of intensive support can result in savings in other areas such as avoiding long stays in temporary accommodation, tenancy breakdown leading to repeat homelessness and avoiding unnecessary health and criminal justice interventions.
- **What are the criteria and who decides which people get to access Housing First?**
 - o The exact criteria for Housing First varies between projects but usually it is offered to people who have experienced homelessness on multiple occasions, who may be sleeping rough or have previously slept rough and have mental and/or physical health issues. They may also have ongoing issues with alcohol or substance misuse.
 - o Housing First has been shown to be most effective for people who have multiple and complex needs and for whom other forms of support have failed.
- **Isn't it just queue jumping?**
 - o The Housing First model does not require the person to go through the traditional homeless route, instead placing the person directly into permanent accommodation. This process may result in a homeless person being given a permanent home before another household that is waiting for accommodation but is usually only offered to homeless households with multiple complex needs. It could be said that Housing First is a way of prioritising households who are in very acute housing need.
- **Does housing people who have ongoing health and addiction problems cause antisocial behaviour?**
 - o Because of the high levels of support provided with Housing First, there do not tend to be issues with antisocial behaviour. Where an issue does arise, it can often be resolved quickly as the support worker can help the tenant liaise with neighbours or their landlord.

4. Housing First in Scotland

Scotland is often thought of as leading the way in creating a rights based system of support for homeless people. Recent legislation has abolished priority need and placed a duty on local authorities to assess and meet the support needs of homeless households or those threatened with homelessness. There has also been a renewed focus on prevention of homelessness in Scotland through the introduction of the Housing Options approach.

While [annual statistics](#) published by the Scottish Government show a consistent downward trend in the number of households assessed as homeless or threatened with homelessness each year - down 35% from a high of 43,564 in 2009/10 to 28,247 in 2016/17 - there are still significant issues which need to be addressed for those who do become homeless. There is a growing recognition that it is very difficult to help homeless people with complex needs within the confines of the traditional homeless system, leading to repeat homelessness for some people and others falling off the radar altogether. Housing First may offer an alternative solution where existing systems are not working.

The first pilot in Glasgow

The first Housing First project to be piloted in the UK was developed by Turning Point Scotland (TPS) in response to high levels of repeat homelessness amongst people with substance misuse issues in Glasgow. The pilot ran from October 2010 until September 2013 and was aimed specifically at supporting homeless people actively involved in drug misuse. Funding for the project was provided by TPS, the Big Lottery Fund and Glasgow's

Health and Social Care Partnership.

The pilot employed six members of staff, including three peer support workers with a history of homelessness and substance misuse, who supported 22 homeless people over the three year period. A full evaluation of the pilot identified very positive results. The majority of those who took part in the pilot maintained their tenancies continuously and half had been in their home for over two years by the end of the pilot period.

The report also identified positive outcomes in terms of improved physical health, mixed but overall positive results in terms of alcohol and substance misuse and a decline in involvement with the criminal justice system and involvement in activities such as begging or sex work.

The full evaluation report is available [online](#).

Following the success of the TPS pilot, a permanent service has been established by TPS in Glasgow which supports around 42 people. TPS is also delivering Housing First in East Dunbartonshire and Renfrewshire. More information about TPS' Housing First projects is available on their [website](#).

'Scaling Up' Housing First

A recent report commissioned by Social Bite, [Eradicating 'Core Homelessness' in Scotland's Four Largest Cities: Providing an Evidence Base and Guiding a Funding Framework](#), explores the feasibility and funding requirements for significantly expanding the provision of Housing First to help tackle 'core homelessness' in Scotland's four biggest cities, Glasgow, Edinburgh, Aberdeen and Dundee. It provides a broad estimate of the cost of implementation

(excluding one off administration costs of setting up the scheme) of around £2.7 million gross in year one (or £1 million net once savings to the public sector are taken into account). In year two, costs would rise to £5.5 million gross (£1.96 million net) and in following years, Housing First would result in net savings to the public sector.

While positive outcomes for service users and long term savings would appear to make Housing First an obvious way forward, existing contracts for traditional homelessness services and lack of up front funding can present challenges to organisations looking to make changes in service delivery. The following case study outlines one possible solution.

From Hostels to Homes - a new funding mechanism for Housing First

At the heart of the success of Housing First is creating the right environment to support complex needs and enable recovery from trauma. This happens best in mainstream community housing environments - a secure home of your own - rather than congregate hostel environments. The effectiveness of Housing First relies as much on doing less of what we know is less effective as it does on doing more of what works.

Glasgow Homelessness Network is currently working in partnership with Social Investment Scotland and Heriot-Watt University, funded by the Scottish Government through the European Social Fund and backed by Big Society Capital, Esme Fairbairn Foundation and Joseph Rowntree Foundation, to develop a Housing First Transition Fund to test how transitional costs such as ongoing operating costs for hostels can be covered through a 'scaling down' process while Housing First is simultaneously scaled up.

This unique project will provide advice and loan funding to leading social landlords and homelessness organisations to support the transition to Housing First by acquiring homes on the open market to replace hostel accommodation, with the loan being repaid once the project is complete through the

proceeds generated by a new use for the former hostel site. As the fund is repaid it will be able to fund further Housing First transition projects.

The transition fund will be piloted in 2018 with a small number of demonstration projects in Glasgow where a commitment has been made to meet the costs of Housing First support through mainstream local authority commissioning.

Once these projects have been established and are demonstrating successful outcomes it is intended that the transition fund will be open for applications from across the UK.



5. Housing First in Northern Ireland

Housing First in Northern Ireland emerged as an NGO led pilot by homelessness charity Depaul in 2013. Depaul identified service users within Stella Maris - a Belfast-based 'wet' hostel for long term street drinkers who do not wish or have failed to stop drinking - who could benefit from the Housing First approach.

Based on the original Pathways Housing First (PHF) model developed in New York, the Depaul approach was a specific initiative for people with extreme complex needs that housed them in independent and self-contained properties in the community. The users targeted were people who were chronically homeless with the highest needs, who represent a small proportion of people who are homeless. Also commensurate with Housing First principles, there was no prerequisite for users to abstain from alcohol use. The service was delivered on an individual case management basis.

A steering group was established to facilitate partnership working that would find service pathways for users. Inter-agency protocols were agreed, although there were no formal pathways or contractual obligations established as the service was seen by some agencies as 'experimental'. For example, agencies would inform Depaul if they had disengaged so the user could be assisted by floating support during the period of crisis.

The pilot phase operated from March to December 2013, followed by the service phase from January 2014. Referrals to the service could come off the street, from Housing Rights Prisons Service, community drug and alcohol services, Police Service of Northern Ireland (PSNI), NI Probation Board, Health and Social Care Trusts, Housing Executive and housing associations.

The pilot and service were funded by the Housing Executive's Supporting People (SP) programme from March 2013. Normally SP funds services for a maximum of two years but in the case of Housing First, support was provided as long as the service user needed it.

Initially, most of the accommodation secured for service users was in the PRS, to which Depaul facilitated access by building direct relationships with private landlords. While private rented properties remain a core component of Housing First's operation, the proportion of social housing secured was increased through joint-working between Depaul and the Housing Executive:

- The Housing Executive's housing solutions team undertook street assessments to register service users on the common waiting list.
- Users were encouraged to select areas of choice where they are more likely to be housed.
- Belfast Housing First users who were housed in private rented accommodation were permitted to retain their points on the common waiting list in case of tenancy breakdown.
- Management transfers were available to users for whom moving areas would facilitate ongoing tenancy sustainment.

An evaluation of the 2014 year found that 19 of 24 service users maintained their tenancy. Users reported better health and social networks, while there was a reduction in levels of alcohol use and in the use of Police Service of Northern Ireland (PSNI) and emergency services. It was estimated that for every £1 invested in the service, there was a social value of £15 returned, representing

good value for money in addition to positive outcomes.

The service was expanded at the beginning of 2015 to increase the number of users and extend the service to Derry. Depaul remains the sole provider of Housing First in Northern Ireland.

The Housing Executive has statutory responsibility for addressing homelessness in Northern Ireland. Its draft Homelessness Strategy for Northern Ireland 2017-22 commits to “extend the use of the Housing First pathway model (subject to available funding)”.

Practitioners highlight the following challenges to address in order to help more people with housing first:

- The lack of availability of housing.
- Formalised pathways with partner agencies remain unestablished.
- LHA not covering private rents in full - discretionary payments are being used to top-up the shortfall but these are limited.
- Recognition of the Housing First model and its potential outcomes is not widespread and there is a risk of different interpretations of what Housing First is and who it can support.



6. Housing First in the Republic of Ireland

The shift towards Housing First in Ireland came in 2011, with the Fine Gael-Labour coalition's endorsement of Housing First in its programme for government. The Dublin Region Homeless Executive (DRHE) replaced the Homeless Agency in the same year - provided by Dublin City Council as the statutory body to address homelessness, DRHE also operates across South Dublin County Council, Fingal County Council and Dún Laoghaire-Rathdown County Council areas.

DRHE commissioned a Housing First pilot in 2011 known as the Dublin housing first demonstration project. It was a joint effort between DRHE, Focus Ireland, Peter McVerry Trust, Dublin Simon Community and Stepping Stones. It followed the PHF model closely - users were housed in the community with the same rights as private tenants, with intensive mobile support provided on an individual case management basis.

The demonstration project was part of a European wide evaluation, assessing how the model could be used in the European context. The majority of experience and research was North America based until that point. There were five 'test sites' (Amsterdam, Budapest, Copenhagen, Glasgow and Lisbon) and five 'peer sites' (Dublin, Gent, Gothenburg, Helsinki and Vienna).

The project ran from April 2011 to September 2014 - users achieved considerably greater levels of housing stability, and they reported better health with less use of substance treatment services without an increase in drug and alcohol related problems. 80-85% of tenancies were sustained among a more vulnerable group with higher support needs. This group had been viewed as unable to be housed in traditional models - previous 'continuum of care' or 'staircase models' were

found to have only 50% tenancy sustainment outcomes.

Focus Ireland and Peter McVerry Trust won the DRHE contract to deliver a Housing First service following the pilot, which commenced in October 2014. As of August 2017, the service has secured a total of 128 tenancies and achieved the same level of housing sustainment as experienced internationally.

In 2014, the Waterford Housing First service began operating - the service is operated by South East Simon Community in partnership with the Health Service Executive (HSE), and is part-funded by Waterford City and County Council. The service normally has between ten and 15 users - in 2015, only two of ten service users were housed and this increased to nine of 11 in 2017.

All 11 of the latter group reported high satisfaction with the support received, with three people seeking less intensive support. While this may create capacity to help others who need intensive support, an expansion of the service is required if everyone who is long-term homeless with complex needs in shelters or sleeping rough in the area is to be helped.

Cork Simon Community has also been operating a Housing First service in Cork and Kerry during 2017, and will shortly conduct a review of the service. The case of one service user of Cork Simon's service - Mr A - is a typical one of long-term homelessness.

Case study - Cork Simon Community

Mr A, now in his fifties, first experienced homelessness before he was 18 years of age. He was an early school leaver. He spent 30 years in and out of homeless services around Ireland. He also spent periods of time in between sleeping on couches and floors of friends' housing. He was a heroin user for 20 years. For five years before he was ultimately housed, Mr A was a chronic rough sleeper, unable to cope with emergency shelter environments or with being around people.

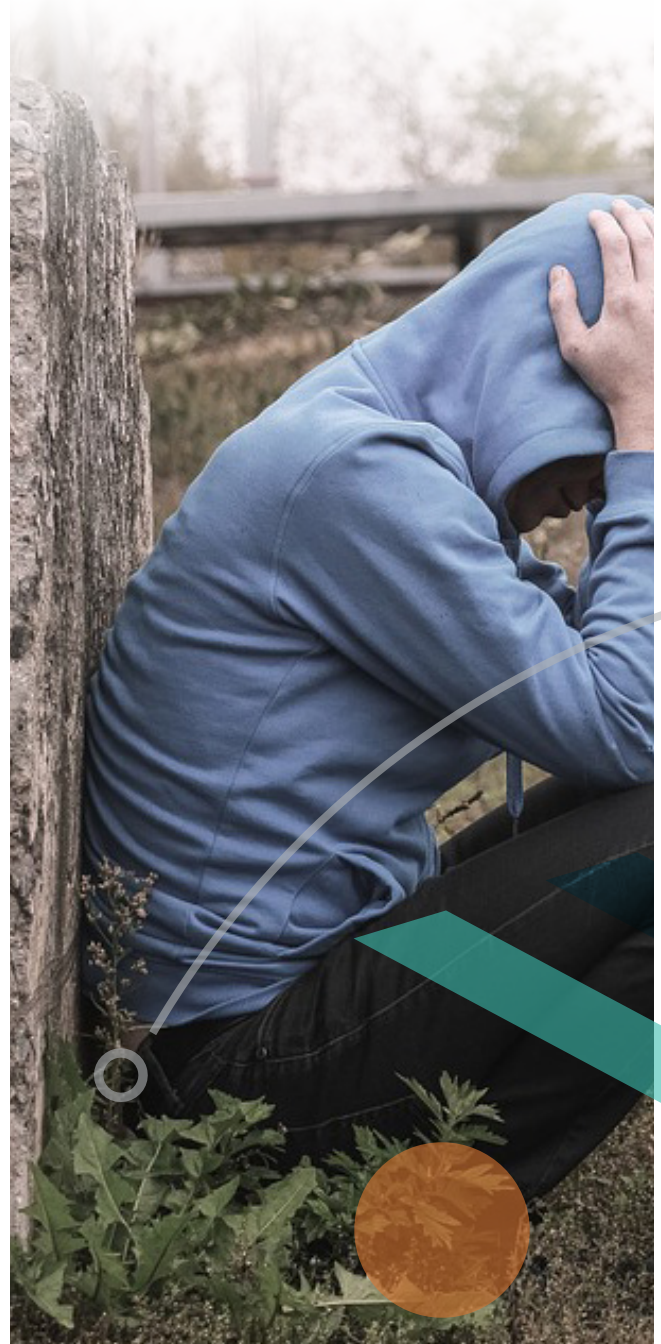
Three years ago, after a prolonged period of rough sleeping in Cork during the winter, Cork Simon's housing first team offered him one of Cork Simon's flats. He moved directly there from rough sleeping. His support package included daily key worker visits, addiction counselling via community addiction supports, a methadone programme, literacy support and support around social engagements.

He stopped using heroin, maintains his methadone programme and maintained his tenancy for two years. He subsequently moved to third-party social housing, his key worker now visits weekly and he recently re-established contact with his adult daughter. Mr A hasn't returned to homeless services since he was housed.

Housing First practitioners in Ireland highlight the following challenges to address in order to help more people with Housing First:

- The lack of availability of housing.
- The risk of different interpretations of what Housing First is and who it can support.
- Weak security of tenure in the PRS.
- Some users being excluded from accessing social housing - for example due to having a criminal record or having engaged in anti-social behaviour - which is contrary to Housing First principles of no preconditions.
- Partner agencies generally not providing services on a 24 hours a day, seven days a week basis.

- Whether Housing First is treated as an integrated solution to chronic homelessness or a 'bolt on' to settlement services in a policy context - this can also relate to how much housing providers are included in delivering the Housing First ethos.
- The lack of integrated homelessness prevention and housing supply issues ensure increasing homelessness levels, which require immediate crisis response - practitioners say the 'housing led' strategy has been damaged as a result, returning to a stronger reliance on emergency sheltered accommodation.



7. Housing First in Wales

Housing First has been an approach attracting considerable attention across Wales as organisations search for means to enhance and improve their response to homelessness. The approach to homelessness in Wales has changed in recent times with the introduction of new legislation in the form of the Housing (Wales) Act 2014. Part 2 of this act put forward a new approach to tackling homelessness with early intervention at its heart. Key components of this approach were as follows:

- A new duty to help anyone threatened with homelessness within the next 56 days.
- A duty to provide help to any homeless person to assist them in securing a home.
- A power rather than a duty to apply the intentionality test.
- New powers for local authorities to discharge their homelessness duties through finding accommodation in the PRS.
- Stronger duties on housing associations to support local authorities in carrying out their homelessness duties.

Whilst these measures continue to be implemented, there have been some encouraging results. The recent Homelessness Monitor report by Crisis Wales found that:

- In 2016/17, almost two thirds (62%) of households assessed as 'threatened with homelessness' (5,718 of 9,210) had had their homelessness successfully prevented, according to official statistical returns, while a 41 per cent success rate (4,500 of 10,884) was recorded by local authorities in homelessness relief cases

- i.e. resolution of actual homelessness (as opposed to interventions to prevent homelessness occurring).

Whilst these statistics present a largely positive overall picture of progress, there continue to be some key areas where further refinement is required. This includes the approach to tackling rough sleeping, addressing the needs of those where no solution to their housing crisis is achieved and ensuring the use of temporary accommodation remains on a downward trajectory.

Housing First has been at the heart of an enthusiastic discussion on making further strides in addressing and reducing homelessness in Wales. For some, this is in the planning phase whilst for others, fully fledged pilots are being evaluated with a view to expanding the approach elsewhere.

Case Study - Isle of Anglesey County Council

Making the case for Housing First

Isle of Anglesey County Council (IoACC) formulated a business case in May 2012 to evidence why their local Supporting People Programme Planning Group should approve a Housing First pilot in Anglesey. The local authority undertook an extensive review of the evidence around Housing First, reflecting on its use in the US and Scotland and concluding that as a model, it had the potential to reach service users who were sleeping rough and had well-entrenched histories of homelessness. A number of benefits were identified to support the provision of a pilot; these included:

- rapid re-housing of street homeless people;
- access to support 24 hours a day,

including on call service at night;

- support being person centred; and
- effective alternative to hostel provision.

Further to this, ACBC recognised the challenge posed by the cap on social rents at Local Housing Allowance (LHA) rates and in their proposal highlighted that there would need to be an individualised approach to ensure a sustainable housing solution could be identified for service users.

The local authority also recognised that the PRS would be one of the major sources of sustainable housing solutions. Further to this, it was felt there may be clear advantages of the establishment of lease agreements with private sector landlords. These benefits included:

- bringing empty homes back into use;
- professional housing management and guaranteed rental income for landlords; and
- the tenant being entitled to Housing Benefit rather than Local Housing Allowance if the lease agreement is with an RSL or IoACC.

IoACC in its proposal felt it was pivotal that the available properties should be dispersed across the island. The advantage of this was that service users would be able to live in localities where existing community and personal relationships may have already been established. Good community relationships are important to the successful achievement of positive outcomes. They concluded that the use of too many properties in one location may create hostility from the locality and so the use of a block of properties or shared housing will not be permitted within this service.

Delivery

IoACC demonstrated a significant challenge in supporting homeless people over 25 years of age with complex needs. This culminated in 12 units initially of support being commissioned by IoACC's Supporting

People team and the Wallich (a homelessness support organisation operating within Wales) were awarded the contract to deliver the service.

The contract was initially agreed for the delivery of 12 units with intensive floating support per week. This was later increased to 14 following a successful 12 month period to provide added value. Further to discussions held during and subsequent to the Service Review in 2015, the Provider agreed to increase support from 14 service users per week to 17 with effect from the 1st of April 2016. A further increase to 20 units was agreed from April 2017, with no change in the contract price.

Co-production

The involvement of service users in the delivery and management of this supporting people service is in its infancy in Anglesey. This means that a truly co-produced service is unlikely to be achievable in the timescales for this project. However, it was proposed that a group of existing or potential service users should be established to gain service user input in the development of the service specification and the procurement of services.

Because Supporting People require individual risk and needs assessments and support plans agreed in partnership with the service user, there is a tradition within supported housing of working in a personalised way with service users.

A personalised approach will be encouraged further and providers bidding for the project would be expected to outline how they will ensure individual needs are met.

Cost-benefits analysis

An assessment of the cost savings for Isle of Anglesey County Council indicates that savings can be made by investment in services for homeless people with complex needs. Investment of around £11,843 per unit per year (based on current tariff system

for floating support) in non-accommodation based support for 12 people (assumes four have mental ill health, four drug related problems and four alcohol related problems) saves additional expenditure of £247,134 representing a saving of £1.74 for every £1 of Supporting People funding invested.

Outcomes

As the commissioning organisation, IoACC regularly worked with the Wallich to monitor the effectiveness of the service provided. Monitoring of the service covering its impact during a six month period revealed that:

- Support workers largely focussed on working towards a small and well-defined set of person-centred outcomes. In practice, this seemed to work best given the chaotic nature of the experiences of the client group.
- Of the 119 service users supported between April 2012 - August 2017:
 - o 78% are still in accommodation;
 - o 43% are in the original accommodation where the support was provided; and
 - o 6.7% have re-presented as homeless within 56 days of support being taken away.



8. Housing First in England

Homeless Link, the membership body for homelessness organisations in England, supports the development of Housing First projects across England. Each of these projects is underpinned by a set of principles based on the evidence gathered by the earliest Housing First approaches developed in the USA:

1. People have a right to a home.
2. Flexible support is provided for as long as it is needed.
3. Housing and support are separated.
4. Individuals have choice and control.
5. An active engagement approach is used.
6. The service is based on people's strengths, goals and aspirations.
7. A harm reduction approach is used.

An extensive body of evidence, compiled by Homeless Link, demonstrates that the more a Housing First service demonstrates fidelity to these principles, the more successful it is likely to be in supporting people to achieve positive outcomes:

"Current practice in England shows that fidelity to the Housing First model is mixed. Whilst there are some services adopting the core philosophy of Housing First, others appear to be drifting from the model and can be described as "Housing led" approaches due to their lower intensity of support, range and duration, and targeting lower needs clients." (Homeless Link, 2015).

What's more, Housing First is not a panacea, but one of a set of effective approaches

to tackling homelessness. A service which demonstrates fidelity to the Housing First principles is most effective, and most appropriate, for people with multiple, complex needs, and for whom previous engagement with homelessness services has not helped. This comprises around 10-20% of people who are sleeping rough or are in contact with services for single homeless people ([Homeless Link, 2015](#)).

As of July 2017, Homeless Link has identified approximately 30 services in England which embody a true Housing First approach. These aren't necessarily identical, and Homeless Link will be publishing research on the various models through which Housing First can be provided in Spring 2018.

Emerging evidence shows a large variety: some services source their housing from the private rented sector. Others source social housing from housing associations. Some services have been able to work with local housing authorities to include allocations for Housing First within their nominations agreements. Others come to arrangements outside these agreements. In some models, the housing provider is also a support provider, and has developed their own Housing First service. In others, the housing provider simply provides homes, and has partnered with a voluntary sector organisation which has been commissioned by a local authority to deliver Housing First support.

All of these services, however, are defined by the fact that they remain true to the core principles of Housing First.

Case Study - Fulfilling Lives in Islington and Camden (FLIC)

Beginnings

Single Homeless Project (SHP) is a London-based charity which delivers the Fulfilling Lives in Islington and Camden project. SHP was one of the first providers to deliver a Housing First model, with three pilot services in separate London boroughs. All three achieved 95% tenancy retention levels.

The project is now funded by the Big Lottery, after FLIC was appointed the lead partner for the Project in Camden and Islington following a series of partnership events and a competitive process.

FLIC is accountable to a Strategic Partnership Board, which consists of representatives from the London Boroughs of Camden & Islington, representatives from the criminal justice, homelessness, substance use and mental health sector and representatives from our Experts by Experience Advisory Board.

Clients

All clients are referred to FLIC's wider frontline services by a wide variety of agencies, including prisons, probation, street outreach teams, hostels, substance misuse and healthcare services. Once a client is working with these services, they can be housed via Housing First if this is appropriate for them, as decided between them and their worker. For example, clients might find supported hostel environments very difficult or stressful to deal with, and so have remained on the street, or they have been evicted from all other options available to them.

The first client was housed using the Housing First model in November 2014. To date, FLIC has housed 15 clients in the PRS using the Housing First model, with a further five clients currently being supported to get the necessary paperwork in order and attend viewings.

Outcomes

As year three draws to a close, we have clear evidence of the long term efficacy of the model. A key success is that all clients have remained well engaged with FLIC.

80% of clients have sustained their accommodation - some for over two years - and of those currently housed via Housing First:

- 80% of clients have not reoffended since being in their own homes. All were offending regularly previously.
- 100% of clients report an improvement in their physical and mental health. All clients are registered with a GP.
- 90% of clients report reduction in their substance and/or alcohol use. Two clients are now abstinent.
- 80% of clients have engaged in educational, training or leisure activities.

Challenges

Of the fifteen clients that have been housed, three no longer have their tenancies. In the first two cases, clients' issues were made more difficult to manage by the location of the tenancies, both of which were in Greater London and a long distance from Camden and Islington, making it more difficult to provide an intensive and responsive support service.

The issue of location remains a key challenge, with rental prices in central boroughs such as Camden and Islington being too expensive for clients in receipt of benefits. As such, we have clients living in properties that currently span seven other boroughs, some of which take over an hour to travel to from our office.

FLIC continues to tackle this challenge by building relationships with new landlords and agents: two agents with whom our relationship had been quite challenging due to issues with clients' tenancies have now had their faith restored in our service due to very positive joint working. FLIC is also exploring further possibilities for building relationships

with housing association providers alongside Homeless Link's Housing First England.

Benefit changes and caps remains an issue, with the introduction of Universal Credit (UC) posing a significant threat - one client, the first of our cohort to be on UC, successfully viewed four properties - only to then be turned down when the landlords discovered he was on UC. FLIC's PRS officer managed to negotiate an agreement, but this will continue to be a difficult challenge to negotiate for other clients going forward.

Learning for other organisations

We have benefited from having a designated worker to source PRS properties and negotiate with landlords and agents. This is very useful as sourcing appropriate properties and maintaining good relationships with housing providers is key to enabling the model to work and progress.

The structure of our team and the way we work - flexible, creative, open ended support, underpinned by a psychologically informed approach, and access to clients' personal budgets, has been essential in the relationship building and support work necessary to make the model a success.

Case Study - Housing First in Brighton

The Housing First pilot project in Brighton commenced in 2014, following an approach by the then Rough Sleepers Street Services Team to the local authority to request funding to trial Housing First for eight service users who had experienced multiple evictions from high support hostels.

Accommodation

Six service users that were part of the Housing First Pilot were offered self-contained accommodation within the PRS managed by the Temporary Accommodation Team at the local authority. One service user was owed a housing duty and subsequently accessed a tenancy with a Registered

Social Landlord (RSL). Finally, one service user already held a tenancy with the local authority and had been rough sleeping when the tenancy had been forcibly taken over. In this case, Housing First intensive support was offered to safely support them back into the tenancy.

The project was then newly commissioned in 2016, and now works with 10 service users, including seven retained from the original pilot.

The decision was taken to move away from utilising the PRS accommodation that was offered through the local authority and supported by commissioners, who are still involved via a quarterly steering group. Instead, new partnerships are being forged with landlords, and a package is being developed to incentivise PRS landlords that will highlight the benefits of the Housing First model.

Moreover, St Mungo's has recently entered into a trial partnership with Brighton YMCA, wherein the YMCA are providing self-contained accommodation for one service user that would not ordinarily be available via the 'stepped approach' to self-contained housing. St Mungo's remain the lead support service here, and from a landlord perspective Brighton YMCA have shown a sympathetic, skilled and nuanced approach.

Clients

Referrals have been identified via a supported housing panel, with criteria stipulating that St Mungo's works with long-term chronically homeless people experiencing multiple and complex needs, who have endured repeat evictions from high support hostels. There are no exclusions for age, past behaviour or offending history, but clients must be locally connected and entitled to UK benefits.

Outcomes

Approximately 80% of clients have sustained their tenancies. Those that have been evicted have remained part of the Housing First

approach and St Mungo's have pro-actively worked to secure alternative accommodation for them. All service users have held accommodation within this model for longer than they have previously done so since becoming homeless. One younger service user, referred via the Leaving Care team, has now held a tenancy for 15 months which marks the longest period of time for which they have continuously been accommodated.

Moreover, around a third of service users have been abstinent from substances since becoming part of Housing First, and all are engaging with health services in a more productive and inclusive way. One service user has successfully completed treatment for a recently diagnosed cancer, and another has now accessed a residential care setting in recognition of their changing needs.

St Mungo's will be imminently commissioning a piece of research that will look in more detail at the journeys of service users with particular emphasis on public health and criminal justice engagement.

Learning

- The principles of Housing First are based on a tenancy first system. In reality, some people's ability to manage the basics of a tenancy after the multiple traumas of repeat homelessness can be a challenge. In some cases, St Mungo's have advocated for alternate options to be explored before Housing First is considered.
- A landlord being fully on board with the Housing First model allows for more productive tenancy sustainment interventions.
- Case coordination and assertive outreach principles have played a vital role in successfully delivering this model.
- Finally, the importance of embedding recovery values and ethos into the model cannot be overlooked in the delivery of Housing First to ensure its efficacy.



9. Further Information

This section provides links to a range of materials that you may find useful.

Guidance and publications

[Housing First in England: The principles](#)

[‘Housing First’ or ‘Housing Led’? The current picture of Housing First in England](#)

[Housing First: Guidance for social landlords](#)

[Housing First: Guidance for support providers](#)

[Housing First: Housing-led solutions to rough sleeping and homelessness](#)

Research and Evaluation

[Turning Point Scotland’s Housing First Project Evaluation](#)

[Housing First Feasibility Study for the Liverpool Region](#)

[Housing First in England Research and Evaluation](#)

[Eradicating ‘Core Homeliness’ in Scotland’s Four Largest Cities: Providing an Evidence Base and Guiding a Funding Framework](#)

[Housing First Europe Hub](#)

Organisations involved in Housing First

[Homeless Link England](#)

[Turning Point Scotland](#)

[Glasgow Homelessness Network](#)

[Depaul](#)

[Cork Simon Community](#)

